PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. Department of the Committee of Information upon the Parameter of Parameter of Information upon the Informatio

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/751,303		Filing Date 01/02/2004		To be Mailed
	Al	PPLICATION A	AS FILE	OTHER THAN SMALL ENTITY OR SMALL ENTITY							
Н	FOR				(Column 2) IMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	_	N/A		N/A	ı	N/A		ı	N/A	.,,
	SEARCH FEE (37 CFR 1.16(k), (f),		N/A		N/A	i	N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),	E	N/A		N/A	l	N/A		ı	N/A	
TO'	FAL CLAIMS CFR 1.16(i))		minus 20 = *			1	x \$ =		OR	x s =	
IND	EPENDENT CLAIM CFR 1.16(h))	s	minus 3 = *			ı	x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheer is \$29 addition 35 U.	If the specification and drawin sheets of paper, the applicatio is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37		on size fee due ) for each on thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		ı	TOTAL	
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	07/24/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	· 60	Minus	<b>↔</b> 61	= 0		x \$ =		OR	X \$50=	0
	Independent (37 CFR 1.16(h))	• 9	Minus	9	= 0		x \$ =		OR	X \$210=	0
	Application Size Fee (37 CFR 1.16(s))										
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
ENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))	*	Minus	**	=		x \$ =		OR	x s =	
Σ	Independent (37 CFR 1,16(h))		Minus	***	=		x \$ =		OR	x s =	
AMENDMENT	Application Size Fee (37 CFR 1.16(s))					]			ı		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
*  6	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR .	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write 0° in column 3.  If the "Highest Municher Proviously Paid For IN THIS SPACE is less than 20, enter" 20°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "20°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 100°, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "30°.  If the "Highest Number Proviously Paid For IN THIS SPACE is less											

This collection of information is orquined by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public with in its in fall (and the process) an application Confidentiality is operand by 38 US 6.7 22 and 37 CFR 1.4. This collection is estimated to the 82 trainwates to complete, encuding patherapy, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CERF (information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.